

PART B—ISSUE FEE TRANSMITTAL

242-1045
561-33

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing, below.

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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

1. CORRESPONDENCE ADDRESS

E1M1/0402

BULLWINKEL PARTNERS LTD
SUITE 1300
19 SOUTH LASALLE STREET
CHICAGO IL 60603-1493

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
INVENTOR'S NAME	
Street Address	RECEIVED PCTM 2010
City, State and ZIP Code	PAUL M. SCHAFFNER
CO-INVENTOR'S NAME	APR 28 1997
Street Address	03
City, State and ZIP Code	
<input type="checkbox"/> Check if additional changes are enclosed	

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/603,657	02/20/96	003	SCOTT, J	2112 04/02/97
First Named Applicant		DONALD G.		

TITLE OF INVENTION (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2	200-014.000	L52	UTILITY	YES	\$645.00	07/02/97

3. Correspondence address change (Complete only if there is a change)

Harold J. Fassnacht
BULLWINKEL PARTNERS, LTD.
19 South LaSalle Street - Suite 1300
Chicago, IL 60603-1493

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 BULLWINKEL PARTNERS, LTD.

2 _____

3 _____

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE: ADVANCE CONTROLS, INC.

(2) ADDRESS: (CITY & STATE OR COUNTRY)

Wheaton, Illinois

A. This application is NOT assigned.

Assignment previously submitted to the Patent and Trademark Office.

Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

Issue Fee Advance Order - # of Copies 10

6b. The following fees should be charged to:

DEPOSIT ACCOUNT NUMBER _____

(ENCLOSE A COPY OF THIS FORM)

Issue Fee Advance Order - # of Copies _____

Any Deficiencies in Enclosed Fees _____

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) Harold J. Fassnacht (Date) 4/29/97

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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Note: If this certificate of mailing is used, it can only be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: **Box ISSUE FEE**

Assistant Commissioner for Patents
Washington, D.C. 20231

on: April 25, 1997 (Date)

(Name of person making deposit)

Sandy Sava

(Signature)

Sandy Sava

(Date)

4-25-97

810 BL 05/08/97 08603657

1 242 645.00 CK

1 561 30.00 CK

1. TRANSMIT THIS FORM WITH FEE